FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT.



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State. DIVISION OF CORPORATIONS

1996

N95000005019 (3) DOCUMENT #

UNIQUES & ANTIQUES CAR CLUB, INC.

UNIQUES & ANTIQUES CAN CLUB, INC.										
Principal Place	e of Business	Mailing Address								
35508 DOGWOOD DRIVE P.O. BOX 464 FRUITLAND PARK FL 34731 FRUITLAND PARK FL 347			1731							
						3. Date Incorporated or Qualified 10/19/1995	3a. Date of	Last Rep	ort	
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number			lied For	
21	26				59-336/095	Not Applicable				
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired	□ \$	8.75 Ac Fee Req		
27 City & State City & State						6. Election Campaign Financing		\$5.00 k	·	
City & State	City & State City & State					Trust Fund Contribution	Added to Fees			
Zip	Country	Zip	T 0	ountry		8. This corporation has liability for i	ntangible tax un	der s. 199	9.032,	
24	25	29	30			Florida Statutes] Yes 🗌 No			
	9. Name and Address of Curr	ent Registered Agent		Ţ		10. Name and Address of New R	egistered Age	nt		
				81	Name					
BAIRD, KATHRYN E				82	Street A	ddress (P.O. Box Number is Not Acceptab	ie)			
401-A S	South Indian River Drive						····			
FT. PIE	RCE FL 34950			63						
	•			84	City		FL ⁶	5 Zip C	ode	
		700 Fix id- Otal d			amad ca	rporation submits this statement for the pur	roose of changing	na its reai:	stered office	
familiar vi SIG, ATURE	with, and accept the obligations of, Si Signature, typed or printed name of registered as	ection 617.0503, Florida Statutes)TE Registe			operation submits this statement to the parapeter of directors. I hereby accept the appound when reinstating ADOITIONS/CHANGES TO OFF	DATE	RECTORS	5 IN 12	
TITLE	D	DELETE	1	1 TITLE		Pres.		hange [Addition	
NAME	BEAR, BOB		13	2 NAME		Frost Low 35508 Dogwood DR.				
STREET ADORESS	5070 O D 474		1.	3 STREET	ADDRESS					
CITY-ST-ZIP	WILDWOOD FL 34785				T-ZIP	Fruitland PK, F1. 34731			Market	
TITLE	D	DELETE				V. Pres.	ш	Change	☑ Addition	
NAME	SUNDEEN, DWIGHT			2 NAME		Evans, Marun 37212 Rolling Acres Rd.				
STREET ADDRESS			. I		ADDRESS	37212 Rolling Acres Kd.				
CITY-ST-ZIP	LEESBURG FL 34748			4 CITY -	ST-ZIP	Ludy Lake, Fl. 3315	5	Change	Addition	
TITLE	D OCCONER DEAN	DELETE		1 TITLE 2 NAME		Sec. Evans, Cindy		J.		
NAME	GESSNER, DEAN P.O. BOX 428 N/A				ADDRESS	37212 Rolling Acres Rd.				
STREET ADDRESS	YALAHA FL 34797			4. CITY-		Lady Lake, Fl. 32159	•		_	
CITY-ST-ZIP TITLE	TABATA TE OTIOI	DELETE				Treus		Change	Addition	
NAME		_	4	2 NAME		Frall Shirten				
STREET ADDRESS	s		4	3 STREE	T ADDRESS	12307 SALL Lake Rd. if	OB) 246	}		
CITY-ST-ZIP	•		4	4 CITY -	ST-ZIP	Exell, Shirley OB307 Sping Lake Rd. if Fruiriand Pr. Pl.	34731			
TITLE		DELETE	5	1 TITLE				Change	☐ Addition	
NAME			5	2 NAME						
STREET ADDRES	s		5	3 STREE	t address					
CITY-ST-ZIP				4 CITY-	ST-ZIP			One nna	Addition	
TITLE		DELETÉ		S 1 TITLE		7000018 -06/03/9601	487 <u>5</u>	opanige 1	L regulated	
NAME				2 NAME		°-06703/9601	072038			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

6 4 CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-96 352 -128-2548 Date Daytine Phone #

***61.25

CR2E037 (12/95)